

**The University of Arizona  
College of Agriculture and Life Sciences  
Cooperative Extension**

<b>Rating Scale:</b> 5 = Truly Exceptional 4 = Exceeds Expectations 3 = Meets Expectations 2 = Needs Improvement 1 = Unsatisfactory
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Appointed Personnel Evaluation Form for Calendar Years 2006-2008  
Form for individual self evaluation, peer and unit head

Name: \_\_\_\_\_ Cooperative Extension, \_\_\_\_\_ County

Categories are matched with the Annual Performance Report. Administrators must comment on any evaluations at extremes (1 or 5), or any ratings that are different from the Peer Committee's ratings. The evaluation must be discussed with the appointed person by May 15, 2009. This evaluation is based on the 2008 annual performance report (APR), APR's from 2006 and 2007, the position description, and discussion on major commitments and plans and collegiality to determine the overall rating.

	CY 2008		
	Self	Peer	Head
<b>1. EXTENSION PROGRAM</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
A. Identification and Planning; <u>Desired</u> outcomes or objectives	<input type="text"/>	<input type="text"/>	<input type="text"/>
B. Program Implementation (Inputs and Outputs)	<input type="text"/>	<input type="text"/>	<input type="text"/>
C. Outcomes/impacts	<input type="text"/>	<input type="text"/>	<input type="text"/>
D. Team Efforts	<input type="text"/>	<input type="text"/>	<input type="text"/>
E. Gifts, Grants, Contracts (yes or no)	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>2. SERVICE</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>3. CREATIVE/SCHOLARLY WORKS</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>4. PROFESSIONAL DEVELOPMENT</b> - CURRENT CAREER PLAN SUBMITTED (circle) Yes / No	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>5. AWARDS AND RECOGNITION</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>6. OVERALL EVALUATION</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Unit Heads should discuss/comment on the items below before completing the appointed personnel's overall evaluation.

A. **MAJOR COMMITMENTS/ACTIVITIES PLANNED** (comments)

B. **COLLEGIALITY** (comments)

Definition located at <http://cals.arizona.edu/extension/profdev/CALSCollegialityDefinition.pdf>

**OVERALL RATING**

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ANNUAL EVALUATION FOR: \_\_\_\_\_

PEER REVIEWERS COMMENTS:

ADMINISTRATOR COMMENTS:

Signed: \_\_\_\_\_ (Administrator) Date: \_\_\_\_\_

APPOINTED PERSONNEL COMMENTS:

Signed: \_\_\_\_\_ (Appointed Person) Date: \_\_\_\_\_